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B-93Neuropsychological Developmental Disorder Following Mold Exposure

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Abstract

Objective: A prospective birth cohort study of 6-year-old children exposed to mold-contaminated homes in early post-natal period found a decline in IQ (Jedrychowski et al., 2011). The present case, which was in litigation, expands the existing literature on this topic and provides further context in which to evaluate pediatric mold cases. Method: The child was gestated, born, and raised in a moldy apartment. When she was 6–9 months old, her location received 37 inches of rain. During her first 3 years of life, medical records showed skin rashes, coughs, fevers, ear infections, watery eyes, nasal congestion, bronchitis, strep throat, irritability, balance issues, and speech delays, symptoms consistent with mold poisoning. Family members had similar illnesses. Ten years of work records showed on-going problems with mold from water intrusions. At 7 years and younger, the child experienced homicidal ideation along with suicidal ideation and gestures and auditory hallucinations. Results: In the multiple interviews, the child appeared very well cared for and was fairly well behaved. Rapport was well-established fairly rapidly and maintained. Her predicted IQ was in the high average range (115–119), which was higher that her observed WISC-IV IQ (75). The Test of Memory and Learning showed Composite Memory Index at the 18th percentile, with Learning Index at the 9th percentile. Stroop Color/Word Test, Children's Version results for Color/Word were at the 19th percentile. The Vineland-II Adaptive Behavioral Scales, Second Edition Adaptive Behavior Composite was at the 9th percentile. Conclusion: When evaluating pediatric developmental disorders, it is important to check for possible toxic causes of

illness. Moldy environments increase the risk of neurotoxicity/developmental delays and should be minimized.

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